

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant's: Vargas, Jaime S., et. al.  
Assignee: Cardica, Inc.  
Title: Integrated Anastomosis System  
Serial No.: 10/057,795  
Examiner: Gary Jackson  
Docket No.: 101

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**FEB 16 2005**

Filing Date: January 23, 2002

Group Art Unit: 3731

February 16, 2005

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**RESPONSE TO OFFICE ACTION****INTRODUCTORY COMMENTS**

This communication is in response to the Office Action of December 23, 2004.

**-- 18 Pages --****To: Gary Jackson, Group Art Unit 3731****VIA FACSIMILE  
(703) 872-9306****RECEIVED  
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FEB 16 2005**

February 16, 2005

Re: Applicant(s): Vargas, Jaime S.; et. al.  
 Assignee: Cardica, Inc.  
 Title: Integrated Anastomosis System  
 Serial No.: 10/057,795  
 Examiner: Gary Jackson  
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Dear Examiner Baxter:

Transmitted herewith are the following documents in the above-identified application:

- (1) This Transmittal Letter; and
- (2) Response to Office Action.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below:

**CLAIMS AS AMENDED**

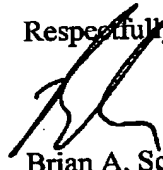
	Claims Remaining <u>After Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>		Rate		Additional <u>Fee</u>
Total Claims	45	Minus	57	=	0	x	\$9	\$	0.00
Independent Claims	5	Minus	5	=	0	x	\$43	\$	0.00
<input type="checkbox"/> Fee of _____ for the first filing of one or more multiple dependent claims per application								\$	
<b>Total additional fee for this Amendment:</b>									\$ <u>0.00</u>
<input checked="" type="checkbox"/> Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.								\$	<u>0.00</u>
<input type="checkbox"/> Please charge our Deposit Account No. 502108 in the amount of								\$	<u>0.00</u>
<input checked="" type="checkbox"/> Please charge any additional fees required and credit any overpayment to our Deposit Account No. 502108.								\$	<u>0.00</u>
<b>Total:</b>									\$ <u>0.00</u>

**Certificate of Transmission**

I hereby certify that this correspondence is being  
 facsimile transmitted to the U.S. Patent and Trademark  
 Office (Fax No. (703) 872-9306) on February 16,  
 2005.

  
 Brian Schar

Respectfully submitted,

  
 Brian A. Schar  
 Attorney for Applicant(s)  
 (650) 331-7162  
 Reg. No. 45,076
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